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Fill in this information to identify your c		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12	☐ Check if this is an
	Chapter 13	amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Frank First Name	First Name
	your driver's license or	C	
	passport).	Middle Name	Middle Name
	Bring your picture identification to your meeting	Scalise Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	xxx - xx - <u>4</u> <u>8</u> <u>8</u> <u>5</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

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Del	ebtor 1 Frank C Scalise		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs	s. I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name
		EIN — — — — — — — —	EIN
5.	Where you live	EIIN	If Debtor 2 lives at a different address:
		3140 S. Wells Number Street	Number Street
		Chicago IL 60616	
		City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
E	Part 2: Tell the Court	About Your Bankruptcy Case	
7.	The chapter of the	Check one: (For a brief description of each soo No	otice Required by 11 U.S.C. § 342(b) for Individuals Filing
۲.	Bankruptcy Code you	for Bankruptcy (Form 2010)). Also, go to the top of	
	are choosing to file under	✓ Chapter 7	
		Chapter 11	
		Chapter 12	
		Chapter 13	

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Deb	ptor 1 Frank C Scalise			Case number (if known	n)
8.	How you will pay the fee	cou pay	rt for more details about how you with cash, cashier's check, or m	my petition. Please check with a may pay. Typically, if you are poney order. If your attorney is a credit card or check with a pre-	paying the fee yourself, you may ubmitting your payment on your
				ts. If you choose this option, signstallments (Official Form 103A	
		By I thar fee	law, a judge may, but is not requ n 150% of the official poverty line	e that applies to your family size his option, you must fill out the A	do so only if your income is less
9.	Have you filed for	☑ No			
	bankruptcy within the last 8 years?	☐ Yes	5.		
		District		When	Case number
		5		144	
		District _		When MM / DD / YYY	Case number
		District		When	Case number
10.	Are any bankruptcy	☑ No			
	cases pending or being filed by a spouse who is	☐ Yes	3.		
	not filing this case with	Debtor		Relation	nship to you
	you, or by a business partner, or by an	District			Case number,
	affiliate?	-		MM / DD / YYY	
		Debtor		Relation	nship to you
		District		When	Case number,
				MM / DD / YYY	Y if known
11.	Do you rent your residence?	✓ No.		n eviction judgment against you?	?
		_	✓ No. Go to line 12.	, , ,	
			Yes. Fill out Initial State	ement About an Eviction Judgme	nt Against You (Form 101A)
			and file it as part of this	bankruptcy petition.	

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Deb	tor 1	Frank C Scalise				Case number (i	if known)		
Pa	art 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
business individua separate	roprietorship is a s you operate as an al, and is not a			Name of business, if any					
	e legal entity such as ration, partnership, or			Number Street					
	sole pro	ave more than one prietorship, use a e sheet and attach it			City	box to describe your husiness:	State	ZIP Co	de
	•	separate sheet and attach it o this petition.			Health Care Busi Single Asset Rea Stockbroker (as of	box to describe your business: ness (as defined in 11 U.S.C. § Il Estate (as defined in 11 U.S.C. defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10 e	101(27A)) c. § 101(51B))	
		r 11 of the ptcy Code and a <i>small business</i>	If you are filing under Chapter 11, the court must know whether you are a small business of can set appropriate deadlines. If you indicate that you are a small business debtor, you memost recent balance sheet, statement of operations, cash-flow statement, and federal inco or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).					must attach your come tax return	
	debtor?	debtor?		No.	I am not filing under C	hapter 11.			
		efinition of small s debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small bu	siness debto	r accordin	g to the definition in
	11 U.S.	S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a small busines	s debtor acc	ording to t	he definition in the
Pa	art 4:	Report If You Ov	vn oı	r Hav	e Any Hazardous I	Property or Any Property	/ That Nee	eds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?				
	safety? any pro	to public health or Or do you own perty that needs ate attention?			If immediate attention	is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

Debtor 1 Frank C Scalise Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

✓ I received a briefing from an approved credit

About Debtor 1:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:
☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Frank C Scalise		Case number (if known)				
P	art 6:	Answer These C	Quest	ions for Reporting Pเ	ırpos	ses		
16.	What ki	ind of debts do you	16a.		-	sumer debts? Consumer derimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
money for a ☐ No. Go		•	-	iness debts? Business deb ement or through the operation		e debts that you incurred to obtain e business or investment.		
			16c.	State the type of debts yo	ou ow	e that are not consumer or bu	sines	s debts.
17.	Are you	u filing under r 7?		No. I am not filing under	r Chap	oter 7. Go to line 18.		
	any exc exclude admini- are paid availab	estimate that after empt property is ed and strative expenses d that funds will be lef or distribution ecured creditors?	Ø	•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Frank C Scalise		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I declarand correct.	are under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		, .	ot pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			concealing property, or obtaining money or property by fraud in esult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
		X /s/ Frank C Scalise Frank C Scalise, Debtor 1	XSignature of Debtor 2			
		Executed on 05/29/2018	Executed on			

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	Frank C Scalise		Case number (if know	n)			
represent	attorney, if you are sed by one not represented by ey, you do not need a page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
		X /s/ Robert J. Adams Signature of Attorney for Debtor	Date	05/29/2018 MM / DD / YYYY			
		Robert J. Adams					
		Printed name Robert J Adams & Associates					
		Firm Name 901 W Jackson Suite 202					
		Number Street					
		Chicago	<u>IL</u>	60607			
		City	State	ZIP Code			
		Contact phone (312) 346-0100	Email address bankr u	uptcy714@gmail.com			
		0013056	<u>IL</u>	_			
		Bar number	State				

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Fill in this i	nformation to i	dentify your case	and this filing:		
Debtor 1	Frank First Name	C Middle Name	Scalise Last Name		
Debtor 2 (Spouse, if filir	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	or the: NORTHERN DI	STRICT OF ILLINOIS		
Case number (if known)					if this is an led filing
Official For	m 106Δ/R				
	A/B: Propert	V			12/15
the asset in the filing together, sheet to this for	e category where y both are equally re rm. On the top of	ou think it fits best. Be esponsible for supplyir any additional pages, v	e as complete and accurate ng correct information. If mo write your name and case nu	asset fits in more than one car as possible. If two married pe ore space is needed, attach a umber (if known). Answer eve Estate You Own or Have	eople are separate rry question.
			in any residence, building, I		
☐ No. G	Go to Part 2. Where is the proper		in any residence, bunding, i	and, or similar property:	
1.1. 3602 S. Emer a	ald Ave, Chicago	, IL Check all t	e property? hat apply. family home	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim	
Single Family	Home	Condo	or multi-unit building minium or cooperative	Current value of the entire property?	Current value of the portion you own?
Cook County		Land	actured or mobile home ment property nare	\$390,000.00 Describe the nature of you interest (such as fee simple entireties, or a life estate)	ple, tenancy by the
			n interest in the property?	One-Half interest	
		_	1 only	Check if this is comm (see instructions)	nunity property
			rmation you wish to add abo	out this item, such as local	
		_	of your entries from Part 1, i te that number here		\$390,000.00
Part 2:	Describe Your \	/ehicles		·	
		-		are registered or not? Include Executory Contracts and Unexpi	•
3. Cars, vans	s, trucks, tractors,	sport utility vehicles, n	notorcycles		
□ No √ Yes					

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Deb	tor 1 Frank C	Scalise	Cas	e number (if known)	
3.2. Mak Mod Yea App Other	r: roximate mileage: er information: 4 Cadillac XTS	Lexis GS460 2016 21,000	Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☐ Check if this is community property	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$20,000.00 Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$21,000.00	ms on Schedule D: s Secured by Property. Current value of the portion you own? \$20,000.00 ms or exemptions. Put the ms on Schedule D:
mil	es)		(see instructions)		
 4. 5. 	Examples: Boats No Yes Add the dollar va	s, trailers, motors, persons	and other recreational vehicles, other vehicles and watercraft, fishing vessels, snowmobiles, movement of the second series of the second series from Part 2, included the second series from Part 2, included the second series of the second s	otorcycle accessories	\$41,000.00
P	art 3: Descr	ibe Your Personal	and Household Items	•	
			terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	•	ls and furnishings appliances, furniture, line	ens china kitchenware		
7.	□ No		nts, his wife has the furnishings from t	he house.	\$0.00
	•		video, stereo, and digital equipment; compute evices including cell phones, cameras, media	•	
	☐ No ☑ Yes. Describ	e Cell Phone			\$100.00
8.		ues and figurines; paintin	gs, prints, or other artwork; books, pictures, o ollections; other collections, memorabilia, col	•	
	Yes. Describ	e			
9.	Examples: Sport		, and other hobby equipment; bicycles, pool tools; musical instruments	ables, golf clubs, skis;	
	✓ No Yes. Describ	oe			

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Deb	for 1 Frank C Scalise	Case number (if known)	
10.	Firearms Examples: Pistols, rifles, shotguns, a	ammunition, and related equipment	
	✓ No ✓ Yes. Describe		
11.	_ N	eather coats, designer wear, shoes, accessories	
	☐ No ☐ Yes. Describe Clothes		\$200.00
12.	Jewelry Examples: Everyday jewelry, costum gold, silver	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	✓ No ☐ Yes. Describe		
13.	Non-farm animals Examples: Dogs, cats, birds, horses		
	✓ No Yes. Describe		
14.	Any other personal and household did not list	l items you did not already list, including any health aids you	
	✓ No Yes. Give specific information		
15.	Add the dollar value of all of your eattached for Part 3. Write the num	entries from Part 3, including any entries for pages you have ber here →	\$300.00
	Add the dollar value of all of your eattached for Part 3. Write the number 4: Describe Your Finan	ber here	\$300.00
Pa	attached for Part 3. Write the number 4: Describe Your Finan	ber here	\$300.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa Do y	Describe Your Finan rou own or have any legal or equita Cash	cial Assets	Current value of the portion you own? Do not deduct secured
Pa Do y	Describe Your Finant ou own or have any legal or equitation Cash Examples: Money you have in your opetition	cial Assets ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y	Describe Your Finant ou own or have any legal or equitation Cash Examples: Money you have in your opetition No Yes Deposits of money Examples: Checking, savings, or other	cial Assets ble interest in any of the following? wallet, in your home, in a safe deposit box, and on hand when you file your	Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y	Describe Your Finant ou own or have any legal or equitation Cash Examples: Money you have in your opetition No Yes Deposits of money Examples: Checking, savings, or oth brokerage houses, and o	cial Assets ble interest in any of the following? wallet, in your home, in a safe deposit box, and on hand when you file your Cash:	Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y	Describe Your Finan Tou own or have any legal or equitar Cash Examples: Money you have in your opetition No Yes Deposits of money Examples: Checking, savings, or oth brokerage houses, and of institution, list each.	cial Assets ble interest in any of the following? wallet, in your home, in a safe deposit box, and on hand when you file your Cash: her financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same	Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa Do y 16.	Describe Your Finan Tou own or have any legal or equitar Cash Examples: Money you have in your of petition No Yes	cial Assets ble interest in any of the following? wallet, in your home, in a safe deposit box, and on hand when you file your Cash: mer financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same Institution name: Checking account	Current value of the portion you own? Do not deduct secured claims or exemptions.

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Debt	tor 1 Frank C Scalis	se	Case number (if known)	
19.	Non-publicly traded sto an interest in an LLC, p		ncorporated and unincorporated businesses, including venture	
	✓ No Yes. Give specific information about them	Name of entity:	% of ownership:	
20.	Negotiable instruments in	nclude personal check	r negotiable and non-negotiable instruments ss, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
	✓ No Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension and Examples: Interests in IF profit-sharing	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or	
	No✓ Yes. List each account separately.	Type of account:	Institution name:	
		Pension plan:	Pension plan	Unknown
22.		deposits you have ma with landlords, prepaid	ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	
22	_		ayment of money to you, either for life or for a number of years)	
23.	☑ No	Issuer name and o		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), §		in a qualified ABLE program, or under a qualified state tuition program.	
	_		nd description. Separately file the records of any interests. 11 U.S.C. § 521(c)	
25.	Trusts, equitable or fut powers exercisable for		erty (other than anything listed in line 1), and rights or	
	✓ No☐ Yes. Give specific information about the	em		
26.			ets, and other intellectual property; proceeds from royalties and licensing agreements	
	No ☐ Yes. Give specific information about the	em		
27.		•	ingibles s, cooperative association holdings, liquor licenses, professional licenses	
	✓ No Yes. Give specific information about the	o.m.		

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Deb	tor 1	Frank C Scalise			Case number (if known)		
Mor	ey or p	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you					
	✓ No		ii.a.a			Endora	1.
	abo	es. Give specific information out them, including whether	ner				1:
	•	u already filed the returns d the tax years				State:	
						Local:	
29.	-	·	m alimony, spousal supp	ort, child support, main	ntenance, divorce settlement,	property	y settlement
	_	s. Give specific information	ion		Alimony:		
					Maintenand	ce:	
					Support:		
					Divorce set	ttlement	:
					Property se	ettlemen	t:
21	_	os. Give specific information		•			
31.	Example No Yes	s. Name the insurance mpany of each policy	life insurance; health sav	vings account (HSA); ci	redit, homeowner's, or renter' Beneficiary:		urrender or refund value:
32.	Any int	terest in property that is are the beneficiary of a livid to receive property because	s due you from someon		•		intelligence of totaling values.
	✓ No ☐ Yes	s. Give specific information	ion				
33.		s against third parties, woles: Accidents, employment	•		de a demand for payment		
	✓ No ☐ Yes	es. Describe each claim					
34.	rights t	to set off claims	ated claims of every na	ture, including counte	erclaims of the debtor and		
	✓ No ☐ Yes	s. Describe each claim					
35.	Any fir	nancial assets you did no	ot already list				
	✓ No ☐ Yes	s. Give specific information	ion				
36.		e dollar value of all of you				→	\$7.00

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Deb	tor 1	Frank C Scalise Case number (if k	nown)
Pa	art 5:	Describe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.
37.	Do you	u own or have any legal or equitable interest in any business-related property?	
		o. Go to Part 6. es. Go to line 38.	
	_		Current value of the portion you own? Do not deduct secured
38.	Accou	ınts receivable or commissions you already earned	claims or exemptions.
	✓ No	os. Describe	
39.		equipment, furnishings, and supplies oles: Business-related computers, software, modems, printers, copiers, fax machines, rugs, tele desks, chairs, electronic devices	phones,
	✓ No	es. Describe	
40.	Machi	nery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No	es. Describe	
41.	Invent	ory	
	☑ No	es. Describe	
42.	Interes	sts in partnerships or joint ventures	
	✓ No		ownership:
43.	Custo	mer lists, mailing lists, or other compilations	
	✓ No	es. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(a No Yes. Describe	41A))?
44.	Any b	usiness-related property you did not already list	
	✓ No	os. Give specific information.	
45.		ne dollar value of all of your entries from Part 5, including any entries for pages you have led for Part 5. Write that number here	\$0.00
Pa	art 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.
46.	Do yo	u own or have any legal or equitable interest in any farm- or commercial fishing-related pr	operty?
		o. Go to Part 7. es. Go to line 47.	

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	Frank C Scalise	Case number (if known)	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
	arm animals		
	xamples: Livestock, poultry, farm-raised fish		
	₫ No ᄀ Yes		
	_ 1es		
48. Cr	ropseither growing or harvested		
₹	No No		
	Yes. Give specific		
	information		
49. Fa	arm and fishing equipment, implements, machinery, fixtures, and tools	s of trade	
V	No No		
	7 Yes		
50. Fa	– arm and fishing supplies, chemicals, and feed		
	- ·		
✓			
] Yes		
51. Ar	ny farm- and commercial fishing-related property you did not already I	ist	
√	7 No		
	Yes. Give specific		
	information		
	dd the dollar value of all of your entries from Part 6, including any entr		\$0.00
att	ttached for Part 6. Write that number here	-	Ψ0.00
Part	7: Describe All Property You Own or Have an Interest in	That You Did Not List Above	1 0
i ait	Describe All Property Tod Own of Have all Interest in	That Fou Did Not Elst Abov	
	o you have other property of any kind you did not already list? ixamples: Season tickets, country club membership		
√	7 No		
	Yes. Give specific information.		
	_		
54. Ac	dd the dollar value of all of your entries from Part 7. Write that number	r here	\$0.00

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Debtor 1	Frank C Scalise	Case nu	umber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	l: Total real estate, line 2		→	\$3	90,000.00
56. Part 2	2: Total vehicles, line 5	\$41,000.00			
57. Part 3	3: Total personal and household items, line 15	\$300.00			
58. Part 4	l: Total financial assets, line 36	\$7.00			
59. Part 5	5: Total business-related property, line 45	\$0.00			
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	7: Total other property not listed, line 54	+ \$0.00			
62. Total	personal property. Add lines 56 through 61	\$41,307.00	Copy personal property total	+\$	41,307.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$4	31,307.00

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Fill in this in	formation to i	dentify your	case.			
Debtor 1	Frank First Name	C Middle Nam	Scalise			
Debtor 2 (Spouse, if filing)		Middle Nam				
			ERN DISTRICT OF I	LLIN	IOIS	
Case number (if known)		inc. <u>Northe</u>			1010	☐ Check if this is an amended filing
Official Form	106C					
		erty You Cl	laim as Exemp	ot		04/16
Using the property space is needed, f write your name ar For each item of p	you listed on Scill out and attach on case number (hedule A/B: Prop to this page as n if known). im as exempt, y	oerty (Official Form 106 nany copies of Part 2 ou must specify the a	SA/B) ?: Add	as your source, list the ditional Page as nece	esponsible for supplying correct information. the property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so
exempted up to the receive certain be exemption of 100	he amount of an enefits, and tax-e % of fair market	y applicable stat exempt retireme value under a la	tutory limit. Some ex nt fundsmay be unl	emp imite mpti	tionssuch as those d in dollar amount. I on to a particular dol	value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Pro	perty You Cla	aim as Exempt			
✓ You are		d federal nonbar	Check one only, on haruptcy exemptions. U.S.C. § 522(b)(2)		if your spouse is filing S.C. § 522(b)(3)	with you.
2. For any prop	erty you list on	Schedule A/B th	nat you claim as exen	npt, f	ill in the information	below.
Brief description Schedule A/B that			Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$20,000.00	$\overline{\mathbf{Q}}$	\$0.00	735 ILCS 5/12-1001(c)
2014 Cadillac X 2014 Cadillac X Line from Schedul	TS	0000 miles)			100% of fair market value, up to any applicable statutory limit	
Brief description:	00 / 04	000! \	\$21,000.00		\$0.00	735 ILCS 5/12-1001(c)
2016 Lexis GS4 Line from <i>Schedul</i>					100% of fair market value, up to any applicable statutory limit	
(Subject to ac	djustment on 4/01	/19 and every 3 y	more than \$160,375? years after that for cas d by the exemption with	es fil		

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Debtor 1 Frank C Scalise			Case numbe	r (if known)
Part 2: Additional Page				
Brief description of the property and line of Schedule A/B that lists this property	n Current value of the portion you own	Amount of exemption	of the on you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check on each exe	•	
Brief description: Lives with parents, his wife has the furnishings from the house. Line from <i>Schedule A/B</i> :6	\$0.00	valu	\$0.00 % of fair market e, up to any icable statutory	735 ILCS 5/12-1001(b)
Brief description: Cell Phone	\$100.00	ш	\$100.00 % of fair market	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7			e, up to any icable statutory	
Brief description: Clothes	\$200.00		\$200.00 % of fair market	735 ILCS 5/12-1001(a), (e)
Line from Schedule A/B:11			e, up to any icable statutory	
Brief description: cash	\$5.00	1009	\$5.00 % of fair market	735 ILCS 5/12-1001(b)
Line from Schedule A/B:16			e, up to any icable statutory	
Brief description: Checking account	\$2.00	☑	\$2.00 % of fair market	735 ILCS 5/12-1001(b)
Line from Schedule A/B:17.1		valu	e, up to any icable statutory	
Brief description: Pension plan	Unknown	1009	\$0.00 % of fair market	735 ILCS 5/12-1006
Line from Schedule A/B: 21			e, up to any icable statutory	

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		dentify your case				
Debtor 1	First Name	C Middle Name	Scalise Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
				210		
	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLING	DIS		
Case number (if known)					Check if this is amended filing	
Official Form	106D					,
		Who Have Cla	ims Secured b	y Property		12/15
1. Do any credit No. Chee Yes. Fill Part 1: List List all secure claim, list the coreditor has a	n. If more space additional pages ors have claims ok this box and so in all of the informat All Secured ed claims. If a correction separatel particular claim, lible, list the claim	e is needed, copy the s, write your name an secured by your propubmit this form to the conation below. Claims reditor has more than or y for each claim. If moist the other creditors is in alphabetical order	Additional Page, fill d case number (if known perty? court with your other so one secured one than one in Part 2. As according to the	column A Amount of claim Do not deduct the value of collateral	es, and attach it to thi	s form.
2.1		Describe the secures the	property that	\$363,000.00	\$390,000.00	
Freedom Mortga Creditor's name P.O.box 8068 Number Street	age Corporatio	Single Fam As of the dat	ily Home	is: Check all that apply.		
☐ Check if this c	ebtor 2 only the debtors and a	Nature of lies ✓ An agree ☐ Statutory ☐ Judgmen	n. Check all that appl ment you made (such lien (such as tax lien, t lien from a lawsuit cluding a right to offse	as mortgage or secured mechanic's lien)	car loan)	
to a communit	•	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$363,000.00

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Debtor 1	Frank C Scalise	Case number (if known)				
Part 1:	Additional Page After listing any entries of sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Z.2 TD Auto Fi Creditor's nam 27777 Inks Number Str	е	Describe the property that secures the claim: – 2014 Cadillac XTS	\$27,023.00	\$20,000.00	\$7,023.00	
Farmington Hill MI 48334 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Auto loan				
Date debt w	ras incurred	Last 4 digits of account number Describe the property that				
Toyota Mo Creditor's nam 5005 N. Ri		secures the claim: – 2016 Lexus GX	\$47,057.00	\$21,000.00	\$26,057.00	
Debtor 1 Debtor 2 Debtor 1 At least Check i	State ZIP Code the debt? Check one. I only	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as statutory lien (such as tax lien, musure) Judgment lien from a lawsuit Other (including a right to offset) Car Loan	s mortgage or secured	car loan)		
Date debt w	as incurred	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$74,080.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$437,080.00

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Eill in this in										
FIII IN this in	ormation to id									
Debtor 1	Frank First Name	C Middle Name	Scalis Last Na							
Dobtor 2										
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me						
United States Ba	nkruptov Court for	tha: NODTHER	N DISTRICT C	E II I INOIS						
	nkruptcy Court for	the: NORTHER	IN DISTRICT C	F ILLINOIS						
Case number (if known)									Check if this is a amended filing	an
Official Form	106E/F									
Schedule E	F: Creditors	s Who Have	e Unsecure	ed Claims						12/15
Do not include an If more space is r to this page. On t	y creditors with p needed, copy the l	partially secured Part you need, fi litional pages, w	claims that are ill it out, number rite your name	e G: Executory Co listed in Schedule the entries in the and case number (D: C boxe	redito s on t	ors W	Vho H	old Claims Secur	red by Property.
	tors have priority									
	to Part 2.		agae. yea.							
☑ Yes.										
claim. For ea show both pri more space is claim, list the	ch claim listed, ide ority and nonpriorit s needed for priorit other creditors in F	entify what type of y amounts. As m y unsecured clair Part 3.	f claim it is. If a c nuch as possible, ns, fill out the Co	e than one priority u claim has both prior list the claims in al antinuation Page of	ity an phabe Part 1	d non etical . If m	priori order nore t	ty am	ounts, list that clai	m here and or's name. If
(For an expla	nation of each type	e of claim, see the	e instructions for	this form in the inst		n boo Total		n	Priority amount	Nonpriority amount
2.1							\$0	0.00	\$0.00	\$0.00
Shawna M Scali	is		Lant A. Balta a		_					40.00
Priority Creditor's Nam 3602 S Emerald			•	f account number	9	6	4_			
Number Street	AVC		wnen was the	debt incurred?					-	
				you file, the claim	is: C	heck	all tha	at app	ly.	
Chicago			Contingent Unliquidate							
Chicago City		60609 ZIP Code	Disputed							
Who incurred the	debt? Check or	ne.	Type of PRIOR	ITY unsecured cla	im:					
Debtor 1 only Debtor 2 only			<u> </u>	upport obligations certain other debts	VOLL O	we th	e aov	/ernm	ent	
Debtor 1 and [•	4		death or personal ir					Cit	
<u> </u>	the debtors and a		intoxicated Other. Spe	ocify						
Is the claim subje		umty uobt	☐ Other. Spe	, on y						
☑ No										
Yes										

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Debtor 1	Frank C Scalise	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
	by creditors have nonpriority unsecured to You have nothing to report in this partices	I claims against you? Submit this form to the court with your other schedules.
If a cre type o	editor has more than one nonpriority unse f claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what cluded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
		Total claim
4.1 Capital O		\$636.00
Nonpriority C 15000 Ca Number	reditor's Name pital One Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Debtor Debtor Debtor At leas Check	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card
Nonpriority C	nicago EMS reditor's Name easury Center Street	\$951.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Debtor Debtor Debtor At leas Check	· · · · · · · · · · · · · · · · · · ·	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical

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Nomptoricy Creditor's Name Sizes	Debtor 1 Frank C Scalise	Case number (if known)	
43 City of Chicago EMS	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number Special Number Street Stre		m sequentially from the	Total claim
Stopper Stop	4.3		\$951.00
Size Chicago L 60694-3500 Check one. Debtor 2 only Debtor 1 and Debtor 2 only Size ZiP Code Check off this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if t	City of Chicago EMS	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Conti	Nonpriority Creditor's Name	When was the debt incurred?	
Chicago IL 60694-3500 City State ZiP Code Disputed Dispu		As of the date you file, the claim is: Check all that apply.	
Chicago IL 60694-3500 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only		<u> </u>	
Chicago L 60694-3500 Who incurred the debt? Check one. Student loans Debtor 1 only Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt set aclaim subject to offser? Nonportry Creditor's Name Check if this claim is for a community debt set aclaim subject to offser? Nonportry Creditor's Name Check if this claim is for a community debt set aclaim subject to offser?			
State	Chicago II 60604.2500	Disputed	
Who incurred the debt? Check one.		Type of NONERIORITY unsecured claim:	
Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 5 and another The specify Debtor 5 and Debtor 5 and another The specify Debtor 6 and Debtor 6 and Debtor 8 of the debtors and another Debtor 6 and Debtor 8 of the debtor 8 of the specify Debtor 9 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor	-		
Debtor 1 and Debtor 2 only			
Detects of person or profit-sharing plans, and other similar debts			
Check if this claim is for a community debt is the claim subject to offset? Medical Medical Medical	<u>'</u>		
Is the claim subject to offset? Yes Yes			
A.4 Cook County Hospital	-	Medical	
A.4 A.5 A.5 Babbar Street Babbar S			
4.4 Cook County Hospital	느		
Cook County Hospital Last 4 digits of account number P.O.Box 70121 Number Street Chicago IL 60673-5698 Chicago IL 60673-			
Last 4 digits of account number When was the debt incurred?	4.4		\$50.000.00
Nonpriority Creditor's Name P.O. Box 70121 Number Street Street Street Contingent Uniquidated Disputed	Cook County Hospital	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply.	Nonpriority Creditor's Name		
Chicago IL 60673-5698 City State ZIP Code Disputed Type of NONPRIORITY unsecured claim:		As of the date you file the claim is: Check all that apply	
Chicago	Number Street	<u> </u>	
Chicago IIL 60673-5698 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor s and another Check if this claim is for a community debt is the claim subject to offset? Monopromy Creditor's Name 9111 Duke Blvd. Number Street Mason OH 45040 City State ZIP Code Who incurred the debtors and another Debtor 1 only State ZIP Code Check if this claim is for a community debt is the claim subject to offset? Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Least one of the debtors and another Debtor 2 only Other. Specify Mason Oth State ZIP Code Check if this claim is for a community debt is the claim subject to offset? Mason Oth State ZIP Code Check one. Debtor 1 only Obeltor 2 only Obeltor 2 only Obeltor 2 only Obeltor 2 only Obeltor 3 only Obeltor 4 one of the debtors and another Other Specify Other Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Stope. Stope.	Okina na II 00070 5000	─ ☐ Disputed	
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes ■ 4.5 □ Debtor 1 and Debtor 2 only □ Number Street ■ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 and Debtor 2 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 only Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No		Type of NONDRIODITY uncessured eleims	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Debtor 1 and Debtor 3 and another Debtor 4 tleast one of the debtors and another Debtor 5 the claim subject to offset? Other. Specify medical			
Debtor 1 and Debtor 2 only	Debtor 1 only		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.5 Shoppicity Creditor's Name 9111 Duke Blvd. Number Street Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No			
Check if this claim is for a community debt is the claim subject to offset? ✓ No Yes 4.5 DSNB/Macy's Nonpriority Creditor's Name 9111 Duke Blvd. Number Street ✓ As of the date you file, the claim is: Check all that apply. ✓ Contingent Unliquidated ✓ Debtor 1 only ○ Debtor 1 only ○ Debtor 1 only ○ Debtor 2 only At least one of the debtors and another ✓ Check if this claim is for a community debt is the claim subject to offset? ✓ No ✓ No ✓ No ✓ Other. Specify medical \$509.00 \$509.00 \$509.00 \$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 \$\$509.00 Ohen was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ─ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Other ✓ Other. Specify Other	=	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No	-		
No		medical	
\$509.00 SNB/Macy's			
Street Mason OH 45040 City Mohoricurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Storet Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Other. Specify Other	<u>.</u> .		
DSNB/Macy's Nonpriority Creditor's Name 9111 Duke Blvd. Number Street Mason City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Other			
DSNB/Macy's Nonpriority Creditor's Name 9111 Duke Blvd. Number Street Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Other	4.5		\$509.00
When was the debt incurred? Street	DSNB/Macv's	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Nonpriority Creditor's Name		
Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Other			
Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Number Street	<u> </u>	
Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No			
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Other	Manage 011 45040		
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Other	•		
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Debtor 1 only		
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other	Debtor 2 only		
☐ Check if this claim is for a community debt Check if this claim is for a community debt Other	—		
Is the claim subject to offset? ☑ No	-		
☑ No		Other	
	Is the claim subject to offset?		

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Debtor 1 Frank C Scalise	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$972.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 5519 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
<u> </u>	Unliquidated	
Sioux Falls SD 57117-5519	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	orean dara	
✓ No		
Yes		
4.7		\$0.00
Gateway Credit Card Plan	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 9025	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Des Moines IA 50368	L Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
☑ No □ Yes		
4.8		\$500.00
Geico Indemnity Company	Last 4 digits of account number1014_	
Nonpriority Creditor's Name Processing Center	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
P.O Box 55126	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Boston MA 02205-5126 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Other	
Is the claim subject to offset? No		
☑ No □ Yes		

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Debtor 1 Frank C Scalise	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$19,903.00
Lending Club	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
21 Stevenson suite 300 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
San Franscico CA 94015	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Personal loan	
Is the claim subject to offset?		
✓ No Yes		
4.10		\$2,464.00
Merrick Bank Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 5721	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	☐ Unliquidated ☐ Disputed	
Hicksville NY 11802-5721		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Vos		
Yes		
4.11		\$25,000.00
Michael Tadin	Last 4 digits of account number	
Nonpriority Creditor's Name 4450 S Morgan St	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Chicago IL 60609	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Personal loan	
Is the claim subject to offset?	. oroonarioan	
No No		
Yes		

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Debtor 1 Frank C Scalise	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$1,760.63
Northwstern Dental Center p.c	Last 4 digits of account number	
Nonpriority Creditor's Name 201 E Huron Ste 2-246	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60611-3197		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Medical	
No		
Yes		
4.13		*
	Last A Paris of account wombon	\$1,313.00
SYNCB/Sync Bank Sport Nonpriority Creditor's Name	Last 4 digits of account number	
P.O BOX 965036	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
ODLANDO EL 22006	Disputed	
ORLANDO FL 32896 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.14		\$434.00
THD/CBNA	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 6497 Number Street	As of the date you file, the claim is: Check all that apply.	
Sioux Falls, SD 571176497	_ Contingent	
	☐ Unliquidated ☐ Disputed	
	— П Бізриїси	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a congration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No □ Yes		

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Debtor 1	Frank C Scalise		Case number (if known)
Part 3:	List Others to Be Notified Abou	ut a Debt That You Alrea	dy Listed
For exa credito debts t	ample, if a collection agency is trying to our in Parts 1 or 2, then list the collection a	collect from you for a debt yo agency here. Similarly, if you itional creditors here. If you	or a debt that you already listed in Parts 1 or 2. u owe to someone else, list the original have more than one creditor for any of the do not have additional parties to be notified for
Michael L	Golding	On which entry in Part 1 o	r Part 2 did you list the original creditor?
Name 7N922 S. N	AcClean Blvd	Line4.8of (Check one	e): Part 1: Creditors with Priority Unsecured Claims
Number S	Street	_	Part 2: Creditors with Nonpriority Unsecured Claims
South Elgi	in IL 60177	Last 4 digits of account nu	ımber

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Debtor 1	Frank C Scalise	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
Total claims	6f.	Student loans	6f.	Total claim
from Part 2	OI.	Student Idans	oi.	φυ.υυ
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$105,393.63
	6j.	Total. Add lines 6f through 6i.	6j.	\$105,393.63

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Fill in this inf	ormation to iden						
Debtor 1	Frank First Name	C Middle Name	Scalise Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number (if known)					Check if this is an amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill	in this inf	ormation to	identify your case:			
Debt	or 1	Frank	С	Scalise		
Debt	.01 1	First Name	Middle Name	Last Name		
Debt	or 2					
	use, if filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court fo	or the: NORTHERN DI	STRICT OF ILLINO	us	
Case	e number				Charle if this is an	
(if kn	nown)				Check if this is an amended filing	
	cial Form	106H : Your Cod	ebtors			12/15
neede page.	ed, copy the On the top	Additional Page	e, fill it out, and number al Pages, write your na	the entries in the bome and case number	olying correct information. If more space is oxes on the left. Attach the Additional Page to this r (if known). Answer every question.	s
	□ No ☑ Yes	,	() - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		,	
		-	-		territory? (Community property states and territoric Rico, Texas, Washington, and Wisconsin.)	es
<u> </u>	No. Go to the Yes. Did	l your spouse, fo	rmer spouse, or legal eq	uivalent live with you a	at the time?	
p c	n Column 1, erson show reditor on S	list all of your on in line 2 agair Schedule D (Offi	n as a codebtor only if t	hat person is a guara Iule E/F (Official Forr	a codebtor if your spouse is filing with you. List to antor or cosigner. Make sure you have listed the m 106E/F), or <i>Schedule G</i> (Official Form 106G). U	
	Column 1:	Your codebtor			Column 2: The creditor to whom you ow	e the debt
					Check all schedules that apply:	
	1					
3.1	Shawna Name	M Scalise			Schedule D, line 2.1	
		Emerald Ave			Schedule E/F, line	
	Number	Street			<u> </u>	
					Schedule G, line	
	Chicago		IL	60609	Freedom Mortgage Corporation	
	City		State	ZIP Code		
3.2		M Scalise			Schedule D, line 2.3	
	Name	Emerald Ave				
	Number	Street			Schedule E/F, line	
					Schedule G, line	
	Chicago		IL	60609	Toyota Motor Credit Corporation	
	City		Stata	7ID Codo		

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Debtor	1 Frank C Scalise	Case number (if known)
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.3	Spouse Name Not Entered Name	- Schedule D, line
		Schedule E/F, line 4.3
	Number Street	Schedule G, line
		City of Chicago EMS
	City State ZIP Code	-
3.4	Spouse Name Not Entered Name	Schedule D, line 2.1
	Number Street	Schedule E/F, line
		Schedule G, line
		Freedom Mortgage Corporation
	City State ZIP Code	
3.5	Spouse Name Not Entered Name	Schedule D, line
	Number Street	Schedule E/F, line 5.1
		Schedule G, line
	City State ZIP Code	Michael L Golding -
3.6	Spouse Name Not Entered Name	Schedule D, line
	Number Street	Schedule E/F, line 4.11
		Schedule G, line
	City State ZIP Code	Michael Tadin -
3.7	Spouse Name Not Entered	
5.7	Name	Schedule D, line
	Number Street	Schedule E/F, line 4.12
		Schedule G, line Northwstern Dental Center p.c
	City State ZIP Code	-
3.8	Spouse Name Not Entered	Cohodulo Dilino
	Name	Schedule D, line 2.3
	Number Street	Schedule E/F, line
		Schedule G, line Toyota Motor Credit Corporation
	City State 7IP Code	· ·

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F	Fill in this inform	ation to iden	tify your case:						
	Debtor 1	Frank	С	Scalise					
		First Name	Middle Name	Last Name			Che	ck if this is:	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing	
	United States Bankri			DISTRICT OF IL	LINC	ois		A supplement showing postpetit	tion
	Case number	upicy Count for th	e. Nontrillant	<u> </u>				chapter 13 income as of the foll	owing date:
	(if known)				_			MM / DD / YYYY	
0	fficial Form 10	<u>6l</u>							
S	chedule I: Yo	ur Income							12/15
res ind ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ring correct infor out your spouse more space is n	mation. If you are e. If you are separ eeded, attach a se). Answer every o	e married and not rated and your spo eparate sheet to th	filing ouse i	jointly, and s not filing v	your : vith y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write	
1.	Fill in your emplo								
	information. If you have more the	on one		Debtor 1				Debtor 2 or non-filing spous	е
	job, attach a separ	_	oloyment status	✓ Employed				☐ Employed	
	with information ab additional employe			■ Not employed	ed			■ Not employed	
		Occ	upation	Engineer				_	
	Include part-time, s or self-employed w		oloyer's name	City of Chicag	0				
	Occupation may in		oloyer's address	33 N. LaSalle,	Ste.	700			
	student or homema applies.	aker, ii ii		Number Street Chicago, IL 60	602			Number Street	
								_	
				Attn: Payroll D)epai	tment		_	
				City		State Zip Co	ode	City State	Zip Code
								,	
		поч	/ long employed t	nere? Zi iea	3				_
F	Part 2: Give D	etails About I	Monthly Incom	е					
	timate monthly inco			m. If you have noth	ing to	report for an	y line	, write \$0 in the space. Include y	our
	ou or your non-filing on need more space, a	•		er, combine the info	ormat	ion for all em	ploye	rs for that person on the lines bel	ow. If
						For Debtor	1	For Debtor 2 or non-filing spouse	
2.	List monthly gros payroll deductions) would be.				2.	\$8,854	4.40		
3.	Estimate and list	monthly overtim	e pay.		3	+\$(0.00		
4.	Calculate gross in	ncome. Add line	2 + line 3.		4.	\$8,85	4.40		

Deb	ebtor 1 Frank C Scalise		Case nu	mber (if know	n)	
			For Debtor 1	For Debto		
	Copy line 4 here	 4 .	\$8,854.40			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,882.40			
	5b. Mandatory contributions for retirement plans	5b.	\$785.06			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	<u>\$191.06</u>			
	5f. Domestic support obligations	5f.	\$1,845.00			
	5g. Union dues	5g.	\$219.14			
	5h. Other deductions. Specify:	5h.	\$0.00			
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5g + 5h.	+ 5e + 5f + 6.	\$4,922.66			
7.	Calculate total monthly take-home pay. Subtract line 6	from line 4. 7.	\$3,931.74			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	a 8a.	\$0.00			
	Attach a statement for each property and business show gross receipts, ordinary and necessary business expens the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spous dependent regularly receive	se, or a 8c.	\$0.00			
	Include alimony, spousal support, child support, mainten divorce settlement, and property settlement.	nance,				
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00	-		
	8f. Other government assistance that you regularly rece	eive		-		
	Include cash assistance and the value (if known) or any cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance P or housing subsidies.	non-				
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	8g.	\$0.00			
	8h. Other monthly income. Specify:	8h.,	+ \$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f	f + 8g + 8h. 9.	\$0.00			
10.	. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-fili	10.	\$3,931.74	+]=	\$3,931.74
11.	. State all other regular contributions to the expenses that	you list in Sched	ule J.			
	Include contributions from an unmarried partner, members of friends or relatives.			ur roommates	, and other	•
	Do not include any amounts already included in lines 2-10 or	amounts that are	not available to pay	expenses list	ed in Sche	dule J.
	Specify:				. 11. +	\$0.00
12.	. Add the amount in the last column of line 10 to the amour income. Write that amount on the Summary of Your Assets a				12.	\$3,931.74
42	if it applies.	tor vou file this f	rm?			Combined monthly income
13.	. Do you expect an increase or decrease within the year aft					4!!! !!!! ! ! !
	No.✓ Yes. Explain:Debtor has been off work do to illnthe duration of his illness.	ess and require	ea FMLA, he is re	eturning to v	vork but i	t will limited for

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G	ill in this inforn	nation to identi	fy your case:			Oh.			
	Debtor 1	Frank	С	Scalis		l	ck if this	s is: ended filing	
	Debior 1	First Name	Middle Name	Last Nar		$\ \ $	A supp	lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me			r 13 expenses ang date:	is or the
	United States Bank	ruptcy Court for the	NORTHERN D	ISTRICT OF	ILLINOIS		MM / D	D / YYYY	
	Case number (if known)								
O	fficial Form 10)6J				J			
So	chedule J: Yo	our Expense	S						12/15
nai	rrect information. I me and case numb	If more space is ne	eded, attach anoth wer every question	ner sheet to th	ng together, both ar nis form. On the top				
1.	Is this a joint cas	se?							
2.	No	Debtor 2 live in a set of set of the set of		J-2, Expenses	for Separate Housel Dependent's relative Debtor 1 or Debtor	onshi		2. Dependent's age	Does dependent live with you? No Yes No Yes No Yes No No Yes No Yes
3.	Do your expense expenses of peolyourself and you	ple other than	☑ No □ Yes						No Yes
	Part 2: Estima	ate Your Ongoi	ng Monthly Exi	oenses					
Es	timate your expens	ses as of your bank s of a date after the	ruptcy filing date	unless you ar	e using this form as supplemental Sche			•	
	lude expenses paid ch assistance and							Your expen	ses
4.		ne ownership expe age payments and	•					4	\$1,200.00
	If not included in	line 4:	-						
	4a. Real estate t	axes						4a	
	4b. Property, hor	meowner's, or renter	's insurance					4b	
	4c. Home mainte	enance, repair, and	upkeep expenses					4c	
	4d. Homeowner's	s association or con	dominium dues					4d.	

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Deb	otor 1 Frank C Scalise	Case number (if known)	
		Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$250.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$250.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	\$100.00
9.	Clothing, laundry, and dry cleaning	9.	\$200.00
10.	Personal care products and services	10.	\$150.00
11.	Medical and dental expenses	11.	\$250.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$50.00
14.	Charitable contributions and religious donations	14.	\$15.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$200.00
	15d. Other insurance. Specify:		Ψ200.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 Car Payment	17a.	\$500.00
	17b. Car payments for Vehicle 2		
	17c. Other. Specify:		
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
19.	Other payments you make to support others who do not live with you. Specify:	19.	

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Deb	tor 1	Frank C Scalise	Case number (if known)		
20.		Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
	20a.	Mortgages on other property	20a		
	20b.	Real estate taxes	20b.		
	20c.	Property, homeowner's, or renter's insurance	20c		
	20d.	Maintenance, repair, and upkeep expenses	20d		
	20e.	Homeowner's association or condominium dues	20e		
21.	Other	r. Specify:	21. +		
22.	Calculate your monthly expenses.				
	22a.	Add lines 4 through 21.	22a	\$3,915.00	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2. 22b		
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,915.00	
23.	Calcu	Calculate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,931.74	
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$3,915.00	
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$16.74	
24.	Do yo	Do you expect an increase or decrease in your expenses within the year after you file this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?				
	V	No			
		Yes. Explain here: None.			
		None:			

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Debtor 1 Frank C Scalise First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	Fill in this	information to i	dentify your case	:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	Debtor 1					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
		o,				
	Case number		r the: NORTHERN D	DISTRICT OF ILLINOIS	<u> </u>	☐ Check if this

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		. •
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$390,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$41,307.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$431,307.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$437,080.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$105,393.63
	Your total liabilities	\$542,473.63
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,931.74
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,915.00

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Deb	otor 1	Frank C Scalise	Case number (if known)					
P	art 4:	Answer These Questions for Administrative and Statistic	cal Records					
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	_	No. You have nothing to report on this part of the form. Check this box and su Yes	ubmit this form to the court with your other schedules.					
7.	What	kind of debt do you have?						
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.								
		Your debts are not primarily consumer debts. You have nothing to report o this form to the court with your other schedules.	n this part of the form. Check this box and submit					
8.	. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$6,225							
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
			Total claim					
	From	Part 4 on Schedule E/F, copy the following:						
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00					
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00					
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00					
	9d.	Student loans. (Copy line 6f.)	\$0.00					
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	eport as \$0.00					

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

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First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Fill in this info	ormation to i	dentify your case	:	
Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Debtor 1		C Middle Name		
Case number	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
	United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLING	OIS
	Case number (if known)				

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).								
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
x								
Signature of Debtor 2								
Date								

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		Mentity volli case			
Debtor 1	Frank	identify your case C	Scalise		
20210	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Eirat Nama	Middle Name	Last Name		
(Spouse, il lilling)	riistivaille	wildule Name	Last Name		
United States Ban	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number				Check if this is an	
(if known)				amended filing	
Official Form	107				
		l Δffairs for Ind	ividuals Filing for B	ankruntev	04/1
				oth are equally responsible for supplying	
	•	e is necucu, allacii a	separate sincer to tims form. O	n the top of any additional pages, write	
Part 1: Giv	e Details Ab		•	ved Before	
Part 1: Giv	re Details Ab	out Your Marital S	question.	ved Before	
Part 1: Giv 1. What is your o Married Not marrie During the las	re Details Ab current marital ed st 3 years, have	out Your Marital S status?	question. Status and Where You Liventh of the than where you live now?	?	
Part 1: Giv 1. What is your o Married Not marrie During the las	re Details Ab current marital ed st 3 years, have	out Your Marital S status?	question. Status and Where You Liv	?	
Part 1: Giv 1. What is your of Married Not marrie 2. During the last No Yes. List at (Community principle)	re Details Ab current marital ed st 3 years, have all of the places st 8 years, did y	out Your Marital S status? you lived anywhere of you lived in the last 3 you ever live with a spo	other than where you live now rears. Do not include where you louse or legal equivalent in a co	?	

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Debtor 1 Frank C Scalise			Case nur	Case number (if known)				
Part 2:	Explain the Sources of	Your Income						
Fill in the lf you	bu have any income from employs the total amount of income you rece are filing a joint case and you have ones. Fill in the details.	eived from all jobs and all bu	sinesses, including part	t-time activities.	lendar years?			
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions			
	nary 1 of the current year until ou filed for bankruptcy:	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$24,000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business				
	to December 31, 2017)	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$97,000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business				
	to December 31, 2016	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$95,000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business				
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4.								

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ebtor 1	Frank C Scalise			Case number (if kno	wn)			
Part 3:	List Certain Payments	You Made Before \	You Filed for Ba	nkruptcy				
. Are eithe	er Debtor 1's or Debtor 2's debts primarily consumer debts?							
□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
	During the 90 days before you	u filed for bankruptcy, di	d you pay any credit	or a total of \$6,425*	or more?			
	□ No. Go to line 7.							
		litor to whom you paid a d that creditor. Do not i mony. Also, do not incl	nclude payments for	domestic support o	bligations, such as			
	* Subject to adjustment on 4/0	01/19 and every 3 years	after that for cases	filed on or after the o	date of adjustment.			
∀ Yes.	Debtor 1 or Debtor 2 or both	n have primarily consu	mer debts.					
	During the 90 days before you			or a total of \$600 or	more?			
	☐ No. Go to line 7.							
		ude payments for dome payments to an attorner Dates of payment	stic support obligation	ons, such as child su				
D Auto Fin	ance		\$1,500.00	\$27,023.00	☐ Mortgage			
reditor's name		Monthly		_	_			
7777 Inkste umber Stree					☐ Credit card			
					Loan repayment			
armington	Hill MI 4833	<u></u>			☐ Suppliers or vendors☐ Other			
ty	State ZIP C							
Insiders corporation		eral partners; relatives of director, person in cont	f any general partner rol, or owner of 20%	s; partnerships of working of their votion				
✓ No	List all payments to an incider							

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Deb	tor 1	Frank C Scalise	Case number (if known)					
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider?						
	Include	payments on debts guaranteed or cosigned by an insider.						
✓ No☐ Yes. List all payments that benefited an insider.								
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosu	es					
9.	List all s	1 year before you filed for bankruptcy, were you a party in any lawsui such matters, including personal injury cases, small claims actions, divorcations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·					
	✓ No ☐ Yes	s. Fill in the details.						
10.	seized,	1 year before you filed for bankruptcy, was any of your property repo or levied? all that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,					
	ت ا	Go to line 11. s. Fill in the information below.						
11.		90 days before you filed for bankruptcy, did any creditor, including a ts from your accounts or refuse to make a payment because you owe	the contract of the contract o					
	✓ No ☐ Yes	s. Fill in the details.						
12.		1 year before you filed for bankruptcy, was any of your property in these, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of					
	✓ No ☐ Yes	3						
Pa	art 5:	List Certain Gifts and Contributions						
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a t	otal value of more than \$600 per person?					
	✓ No ☐ Yes	s. Fill in the details for each gift.						
14.		2 years before you filed for bankruptcy, did you give any gifts or cont charity?	ributions with a total value of more than \$600					
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.						

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Deb	otor 1	Frank C Scalis	se	C	ase number (if k	nown)		
P	art 6:	List Certain	Losses					
15.		1 year before you isaster, or gambl		ıptcy or since you filed for bankruptcy, d	lid you lose any	thing because of th	eft, fire,	
	✓ No	s. Fill in the detail	S.					
P	art 7:	List Certain	Payments or	Transfers				
16.				ıptcy, did you or anyone else acting on y nkruptcy or preparing a bankruptcy peti		or transfer any prop	perty to	
	Include	any attorneys, ba	nkruptcy petition	preparers, or credit counseling agencies for	r services require	ed for your bankrupto	cy.	
	□ No ✓ Yes	s. Fill in the detail	S.					
	bert J. A	Adams & Assoc	iates	Description and value of any property —	transferred	Date payment or transfer was made	Amount of payment	
540	W. 35t	h Street, Suite	100	_		05/21/2018	\$400.00	
Num	ber Str	eet						
				_				
	icago	IL	60616	_				
City		Stat	e ZIP Code					
Ema	il or websit	te address		_				
Pers	on Who M	lade the Payment, if I	Not You	_				
		•		ıptcy, did you or anyone else acting on y	our behalf pay	or transfer any proj	perty to	
		-		with your creditors or to make payments			•	
	Do not i	include any payme	ent or transfer tha	t you listed on line 16.				
	✓ No ☐ Yes	s. Fill in the detail	s.					
18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?							
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	✓ No	s. Fill in the detail	S.					
19.				kruptcy, did you transfer any property to n called asset-protection devices.)	a self-settled tr	ust or similar devic	e of which	
	✓ No	s. Fill in the detail	`	33.035.				

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Deb	otor 1	Frank C Scalise	Case number (if known)
P	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units
20.		I year before you filed for bankruptcy, were any financial accounts or closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates pension funds, cooperatives, associations, and other financial institutions	•
	✓ No ☐ Yes	. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankrupturities, cash, or other valuables?	cy, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	☑ No	ou stored property in a storage unit or place other than your home wit. Fill in the details.	hin 1 year before you filed for bankruptcy?
Ρ	art 9:	Identify Property You Hold or Control for Someone Else	9
23.	•	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
Ρ	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	hazardoι	nental law means any federal, state, or local statute or regulation conc is or toxic substance, wastes, or material into the air, land, soil, surfact statutes or regulations controlling the cleanup of these substances,	ce water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmen or used to own, operate, or utilize it, including disposal sites.	tal law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazard e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of	when they occurred.
24.	Has any law?	y governmental unit notified you that you may be liable or potentially l	iable under or in violation of an environmental
	☑ No □ Yes	. Fill in the details.	

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Deb	tor 1	Frank C Sc	alise		Ca	ise number	(if known)			
25.	Have you notified any governmental unit of any release of hazardous material? ☑ No ☐ Yes. Fill in the details.									
26.	. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	✓ No ☐ Ye	s. Fill in the de	etails.							
P	art 11:	Give Deta	ails About Y	our Business or Connecti	ons to Any E	Business	3			
27.	Within busine	•	e you filed for I	oankruptcy, did you own a busi	ness or have ar	ny of the fo	ollowing co	nnections	to any	
	 A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ✓ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. ✓ Yes. Check all that apply above and fill in the details below for each business. 									
		t Boxing Clu	b	Describe the nature of the bu Boxing Club	ısiness	Employer Identification number Do not include Social Security number or ITIN.			or ITIN.	
Business Name 3411 Halstead St Number Street		 Name of accountant or book PATRICK SCALETTA, CP. 	•	EIN:	=					
Chi City	cago	IL Stat	60608 te ZIP Code	-		From _	2013	_ To_	2017	_
28.		-	-	pankruptcy, did you give a finar or other parties.	icial statement	to anyone	about your	business	? Include	
	✓ No □ Ye	s. Fill in the de	etails below.							

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Debtor 1	Frank C Scalise		Case number (if known)
Part 12	Sign Below		
that answer	ers are true and correct. I unde		
X /s/ Fra	nk C Scalise	X	
Frank C	Scalise, Debtor 1	Signature of Debtor 2	
Date _	05/29/2018	Date	
Did you at	tach additional pages to <i>Your</i> S	Statement of Financial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes			
Did you pa	ay or agree to pay someone wh	o is not an attorney to help you fill out ba	nkruptcy forms?
√ No			
	Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1 Frank C Scalise First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)	Fill in this information to identify your case:				
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number	Debtor 1		C Middle Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number		First Name	Middle Name	Last Name	
	, , , , , , , , , , , , , , , , , , ,				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.					
Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?		Did you claim the property as exempt on Schedule C?	
Creditor's name:	Freedom Mortgage Corporation		Surrender the property. Retain the property and redeem it.		No Yes
Description of	Single Family Home		Retain the property and enter into a Reaffirmation Agreement.		
property securing debt:			Retain the property and [explain]: Debtor will continue making pay reaffirming. Debtor does not live in the house		ts to creditor without
			Deptor does not live in the nouse	,	
Creditor's name:	TD Auto Finance		Surrender the property. Retain the property and redeem it.		No Yes
Description of	2014 Cadillac XTS		Retain the property and enter into a Reaffirmation Agreement.		
property securing debt:			Retain the property and [explain]:		
Creditor's	Toyota Motor Credit Corporation		Surrender the property.		No
name:			Retain the property and redeem it.		Yes
Description of property	2016 Lexus GX		Retain the property and enter into a Reaffirmation Agreement.		
securing debt:			Retain the property and [explain]:		

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Debtor	1 Frank C Scalise		Case number (if known)	
Part	2: List Your Unexpired P	ersonal Property Leases		
fill in th	ne information below. Do not list r	eal estate leases. Unexpired le	: Executory Contracts and Unexpired Leases (Official Form 10 ases are leases that are still in effect; the lease period has not trustee does not assume it. 11 U.S.C. § 365(p)(2).	
De	escribe your unexpired personal p	roperty leases	Will this lease be assumed	?
No	one.			
Part	3: Sign Below			
	ler penalty of perjury, I declare tha sonal property that is subject to ar	-	about any property of my estate that secures a debt and	
X <u>/s/</u> F	Frank C Scalise	X		
Fran	nk C Scalise, Debtor 1	Signature of Deb	otor 2	
Date		Date		
	MM / DD / YYYY	MM / DD /	YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
,	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

ın	re Frank C Scalise	Case No.
		Chapter 7
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert that compensation paid to me within one year before the filing of services rendered or to be rendered on behalf of the debtor(s) in is as follows:	the petition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$1,900.00
	Prior to the filing of this statement I have received	\$400.00
	Balance Due	
2.	The source of the compensation paid to me was: ☐ Other (specify)	
3.	The source of compensation to be paid to me is:	
	✓ Debtor Other (specify)	
4.	I have not agreed to share the above-disclosed compensation associates of my law firm.	on with any other person unless they are members and
	I have agreed to share the above-disclosed compensation wassociates of my law firm. A copy of the agreement, togethe compensation, is attached.	
5.	In return for the above-disclosed fee, I have agreed to render leg	al service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;	ce to the debtor in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements o	f affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and co	onfirmation hearing, and any adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/29/2018 /s/ Robert J. Adams

Date Robert J. Adams

Robert J. Adams & Associates 901 W Jackson Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Frank C Scalise

Frank C Scalise

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Frank C Scalise CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above nam	ied Debtor h	ereby verifies	that the attac	hed list of cre	editors is true a	ind correct to th	ne best of his/h	er
know	ledge.								

Date	5/29/2018	Signature // Is/ Frank C Scalise Frank C Scalise
Date		Signature

Capital One 15000 Capital One Richmond, VA 23238

City of Chicago EMS 33589 Treasury Center Chicago, IL 60694-3500

Cook County Hospital P.O.Box 70121 Chicago, IL 60673-5698

DSNB/Macy's 9111 Duke Blvd. Mason, OH 45040

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

Freedom Mortgage Corporation P.O.box 8068 Virginia Beach, VA 23450

Gateway Credit Card Plan PO Box 9025 Des Moines, IA 50368

Geico Indemnity Company Processing Center P.O Box 55126 Boston, MA 02205-5126

IRS PO Box 21126 Philadelphia, PA 19114 IRS Mail Stop 5010 CHI Chicago, IL 60604

IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300 Chicago, IL 60606-5208

Lending Club 21 Stevenson suite 300 San Franscico, CA 94015

Merrick Bank PO Box 5721 Hicksville, NY 11802-5721

Michael L Golding 7N922 S. McClean Blvd South Elgin, IL 60177

Michael Tadin 4450 S Morgan St Chicago, IL 60609

Northwstern Dental Center p.c 201 E Huron Ste 2-246 Chicago, IL 60611-3197

Shawna M Scalis 3602 S Emerald Ave Chicago, IL 60609

Shawna M Scalise 3602 W. Emerald Ave Chicago, IL 60609

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SYNCB/Sync Bank Sport P.O BOX 965036 ORLANDO, FL 32896

TD Auto Finance 27777 Inkster Rd Farmington Hill, MI 48334

THD/CBNA
PO Box 6497
Sioux Falls, SD 571176497

Toyota Motor Credit Corporation 5005 N. River Blvd. Cedar Rapids, IA 52411-6634